

Delaware

[Title II](#) | [ADAP](#) | [Title III](#) | [AETC](#)

State CARE Act Program Profile

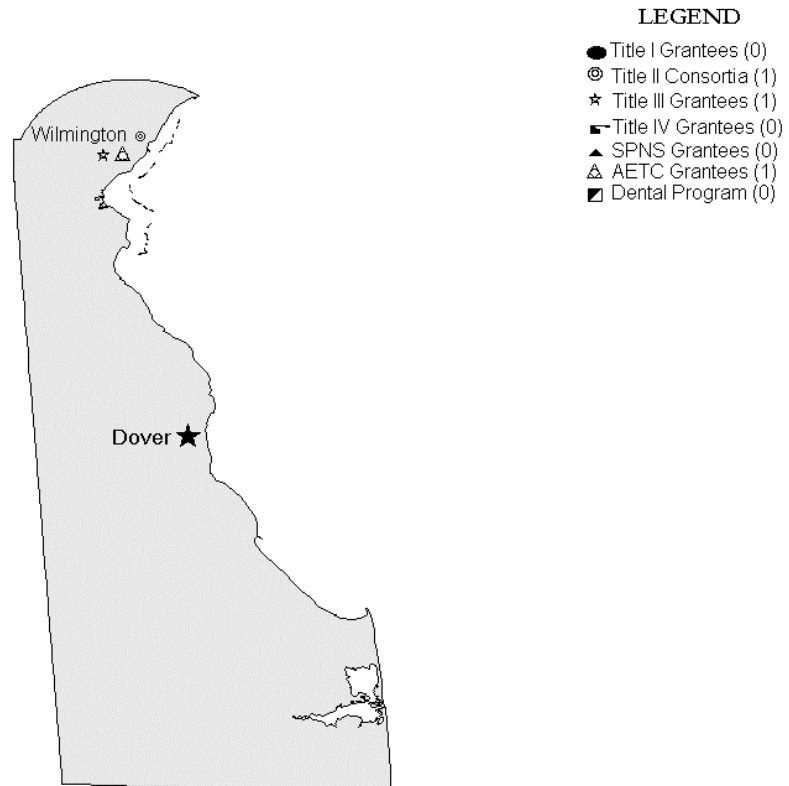
CARE Act Funding History Since 1996

Fiscal Year	1996	1997	1998	Total
Title I	\$0	\$0	\$0	\$0
Title II (including ADAP)	\$1,259,006	\$1,942,410	\$2,429,055	\$5,630,471
ADAP	(\$183,580)	(\$619,686)	(\$1,076,994)	(\$1,880,260)
Title III	\$0	\$351,409	\$373,634	\$725,043
Title IV	\$0	\$0	\$0	\$0
SPNS	\$0	\$0	\$0	\$0
AETC	\$94,542	\$77,000	\$100,000	\$271,542
Dental	\$0	\$0	\$0	\$0
Total	\$1,353,548	\$2,370,819	\$2,902,689	\$6,627,056

Number of CARE Act-funded Grantees in State (in addition to Title II and ADAP grants)

	1996	1997	1998
Title I	0	0	0
Title III	0	1	1
Title IV	0	0	0
SPNS	0	0	0
AETC (grantee or subcontractor)	1	1	1
Dental	0	0	0

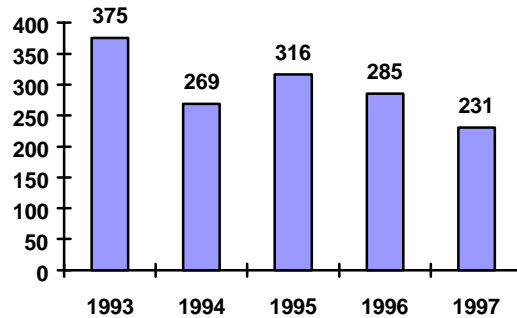
Location of FY 1998 CARE Act Grantees and Title II Consortia



HIV/AIDS Epidemic in the State: Delaware (Pop. 731,581)

- ▶ Persons reported to be living with AIDS through 1997: 912
- ▶ New AIDS Cases by Calendar Year, 1993-1997

- ▶ State reporting requirement for HIV:
No HIV reporting
- ▶ State AIDS Cases (cumulative) since 1993: 1,476 (<1% of AIDS cases in the U.S.)



Demographics of AIDS Cases Reported in 1997

	State-Specific Data	National Data
Men (13 years and up):	75%	78%
Women (13 years and up):	25%	22%

	State-Specific Data	National Data
<13 years old :	1%	1%
13-19 years old :	0%	1%
20+ years old :	99%	98%

	State-Specific Data	National Data
White:	19%	33%
African American:	77%	45%
Hispanic:	3%	21%
Asian/Pacific Islander:	0%	<1%
Native American/Alaskan Native:	0%	<1%

	State-Specific Data	National Data
Men who have sex with men (MSM):	26%	35%
Injecting drug user (IDU):	37%	24%
Men who have sex with men and inject drugs (MSM/IDU):	3%	4%
Heterosexual contact:	13%	13%
Other, unknown or not reported:	21%	24%

Pediatric Cases, by exposure category

	State-Specific Data	National Data
Hemophilia/coagulation disorder:	0%	<1%
Mother with/at risk for HIV infection:	100%	91%
Receipt of blood transfusion, blood components, or tissue:	0%	<1%
Other, unknown or not reported:	0%	8%

Co-morbidities

	State Cases per 100,000 Population	U.S. Cases per 100,000 Population
Chlamydia (1996)	316.6	194.5
Gonorrhea (1996)	203.0	124.0
Syphilis (1996)	4.9	4.3
TB (1997)	5.3	7.4

Statewide Coordinated Statement of Need (SCSN)

To enhance collaboration in HIV needs assessment and planning activities among CARE Act grantees and to maximize CARE Act resources statewide, Title II grantees were required to develop, in collaboration with other CARE Act grantees, an SCSN by March 1998. SCSNs must include: a discussion of existing needs assessments; epidemiologic data; discussion of emerging issues in HIV care in the state; critical gaps in HIV medical and support services; and broad goals to address major service gaps.

- **Gaps:** primary care; dental services; mental health services addressing the needs of PLWHs; and substance abuse treatment

State Medicaid Information

In 1998, Medicaid is estimated to have covered 55% of U.S. adults with AIDS and 90% of pediatric AIDS cases. Applying these percentages to the number of AIDS cases in the U.S., at least 108,000 individuals with AIDS were covered by Medicaid in 1998.

Medicaid Income Eligibility Requirements

Eligibility Category	Income
Adult Aged/Blind/Disabled*	75% FPL
Pregnant Women	185% FPL

*Income eligibility for State's ADAP program is 230% FPL.

Medicaid Prescription Drug Benefits Limits

Co-payment:	No
Limit on Rx per month:	No
Refill limit:	No
Quantity Limit:	No

Waivers

1115

Section 1115 of the Social Security Act gives the Secretary of Health and Human Services broad authority to waive provisions in Title XIX, the Medicaid statute. Populations covered vary from waiver to waiver, as does the scope of coverage and the nature of the provider organization.

1115 waiver: Yes

Beneficiary groups: Current Medicaid recipients (all current AFDC, AFDC -related and SSI Medicaid recipients) except those receiving long-term care services and Medicare beneficiaries, and low-income adults and children with incomes up to 100% FPL.

1915(b)

Section 1915(b) of the Social Security Act authorizes the Secretary of Health and Human Services to waive compliance with certain portions of the Medicaid statute that prevent a state from mandating that Medicaid beneficiaries obtain their care from a single provider or health plans.

1915(b) waiver(s): No

Title II: Delaware

Title II funds are provided to States and Territories to improve the quality, availability and organization of health care and support services for PLWH. From FY 1991 to FY 1998, more than \$1.9 billion in funding was appropriated for Title II programs in the U.S.

Funding History

Fiscal Year	1996	1997	1998	Total
Title II Formula Grant	\$1,259,006	\$1,942,410	\$2,429,055	\$5,630,471
ADAP (included in Title II grant)	(\$183,580)	(\$619,686)	(\$1,076,994)	(\$1,880,260)
Minimum Required State Match	\$0	\$0	\$0	\$0

Allocation of Funds

	1998
Health Care (State Administered)	\$1,700,927/67%
Home and Community Care	(\$408,380)
Health Insurance Continuation	(\$45,000)
ADAP/Treatments	(\$1,247,547)
Direct Services	(\$0)
Case Management (State Administered)	\$0/0%
Consortia	\$466,055/18%
Health Care*	(\$60,055)
ADAP/Treatment	(\$0)
Case Management	(\$121,000)
Support Services**	(\$285,000)
Administration, Planning and Evaluation (Total State/Consortia)	\$372,628/15%

* includes: diagnostic testing, preventive care and screening, prescribing and managing medication therapy, continuing care and management of chronic conditions, and referral to specialty care.

** includes: counseling, direct emergency financial assistance, companion/buddy services, day and respite care, housing assistance, and food services.

Consortia Activities, FY 1997

States provide services directly or through subcontracts with Title II HIV care consortia. A consortium is an association of public and nonprofit health care and support service providers and community-based organizations that plans, develops and delivers services for people living with HIV disease.

Number of consortia in State: 1

Consortium Name	Location	Service Area	Title II Funding, FY 1997
Delaware HIV Consortium	Wilmington	Statewide	\$594,768

Accomplishments

Clients Served (duplicated count), FY 1996:	1,230
Men:	67%
Women:	33%
<13 years old:	0%
13-19 years old:	1%
20+ years old:	99%
White:	34%
African American:	56%
Hispanic:	7%
Asian/Pacific Islander:	0%
Native American/Alaskan Native:	0%
Other, unknown or not reported:	2%
Men who have sex with men (MSM):	13%
Injecting drug user (IDU):	53%
Men who have sex with men and inject drugs (MSM/IDU):	7%
Heterosexual contact:	27%

► **Improved Patient Access**

- The Delaware ADAP has grown from 110 enrolled clients in 1996 to 150 clients in 1997, a 36% increase. As of mid-1998, the grantee reported that approximately 40% were receiving combination therapy with protease inhibitors through ADAP. Additional ADAP clients are accessing protease inhibitors through other resources, including Title III.
- As of December 1997, the three major HIV/AIDS clinics provided primary health care to a total of 1,145 clients, while the total number of case-managed consortia clients was 1,257, a dramatic increase since FY 1994 when the State reported 250 case-managed clients. Of 694 clients being served by the Wilmington-based clinic during 1997, 37% were women, 6% Hispanic, and 67% African America. Of the 366 clients at the Georgetown clinic, 24% were women and 50% minorities. The new HIV clinic in Dover served 85 clients.
- The grantee reports that ADAP clients in Delaware mirror the demographic characteristics of AIDS cases in Delaware, in terms of race/ethnicity.
- New services added in FY 1997 included: 1) routine dental care services, with a dental hygienist; and 2) baseline and follow-up ophthalmologic visits to identify and, if necessary, treat CMV, with close CARE Act and Medicaid coordination to ensure that the Title II grantee is payor of last resort.
- The State opened a new HIV Wellness Clinic in Dover in 1997 that follows the same care and treatment protocols and standards as those established for other clinics. During the first nine months, the new clinic served 85 clients.
- The grantee provided Title II funds to help support a new HIV Family Resource Center in Wilmington operated by Catholic Charities. The center opened in July 1997.

► **Cost Savings**

- Both the Title II ADAP and the Christianna Title III programs participate in the Office of Drug Pricing's discount purchasing program, which results in significant cost savings.
- The ADAP instituted a co-payment for services using a sliding-scale fee system, starting in 1997. Approximately 88% of clients served, however, have annual incomes at or below 200% FPL.

► **Other Accomplishments**

- Title II program and providers continue to work closely with Title III, Title IV, STD, TB, counseling and testing, other public health and women's health programs, Medicaid, substance abuse, Social Security, VNA/hospice, Department of Corrections, and community-based providers to provide comprehensive, case-managed services to individuals and families living with HIV disease.
- The grantee helped organize, and participated in: 1) a two-day HIV/STD treatment conference for providers and consumers (400 attendees); 2) a conference on HIV in prisons; 3) training for case managers; and 4) consumer education on new treatments and CARE Act services, with technical assistance to help establish a PLWH consumer coalition.

AIDS Drug Assistance Program (ADAP): Delaware

ADAPs provide medications to low-income PLWH with limited or no coverage from private insurance or Medicaid. ADAP is just one of multiple sources of public and private funding for HIV treatment, the largest source being Medicaid.

Funding History

Fiscal Year	1996	1997	1998	Total
Title II Funds	\$365,000	\$934,000	\$1,320,611	\$2,619,611
State Funds	\$35,000	\$0	\$0	\$35,000
Total	\$400,000	\$934,000	\$1,320,611	\$2,654,611

Program

- ▶ Administrative Agency: Div. of Public Health
- ▶ Formulary: 47 drugs, 4 protease inhibitors, 7 other antiretroviral drugs.
- ▶ Medical Eligibility
 - ▶ HIV Infected: Yes
 - ▶ CD4 Count: No
- ▶ Financial Eligibility
 - ▶ Asset Limit: Yes
 - ▶ Annual Income Cap: No
- ▶ Co-payment: Sliding scale
- ▶ Enrollment cap: No
- ▶ Waiting list as of 10/98: No
- ▶ Waiting list for protease inhibitors as of 10/98: No

Clients Served

Clients enrolled, 10/98:	140
Number using ADAP each month:	110
Percent of clients on protease inhibitors:	37%
Percent of active clients below 200% FPL:	88%

Client Profile, FY 1996

Men:	73%
Women:	27%

<13 years old:	0%
13-19 years old:	0%
20+ years old:	100%

White:	45%
African American:	45%
Hispanic:	9%
Asian/Pacific Islander:	0%
Native American/Alaskan Native:	0%

Title III: Delaware

Title III provides funding to public and private nonprofit entities for outpatient early intervention and primary care services. From FY 1991 to FY 1998, \$445.8 million was appropriated for Title III programs in the U.S.

Funding History

Fiscal Year	1996	1997	1998	Total
Number of Programs Funded in State	0	1	1	
Total Title III funding in State	\$0	\$351,409	\$373,634	\$725,043

Accomplishments

► Improved Patient Access

- In 1997, Christiana Care Health Services established satellite HIV primary care at the Porter State Service Center, Delaware Department of Public Health.
- In Kent County, HIV-infected residents with Medicaid or insurance were able to access primary HIV care services through the Kent County Clinic. With Title III funding, services have been expanded to all Kent County residents regardless of their insurance status.
- One goal of the Christiana Care Health Services' early intervention program is to offer mental health evaluation and treatment on-site, directly integrated into the primary care setting. With supplemental funding through Title III, indigent clients have been able to access Pathways, a mental health and substance abuse treatment program.

► Improved Patient Outcomes

- The mortality rate statewide for clients enrolled in the Christiana Care Health Services' HIV Program has decreased from 15% in 1995 to 3% in 1997. The rate of hospital admissions related to HIV infection decreased by 33% in 1997 with the length of stay averaging 6.3 days.
- Prior to the establishment of the Porter State Service Center, 50% of the clients testing HIV infected were lost to follow-up and never entered into primary care. With the direct integration of HIV primary care offered on-site as a result of Title III funding, the number of clients entering primary care has increased to 95%.
- At the Kent County clinic, the no-show rate for appointments has decreased to 15%.

► **Cost Savings**

- The grantee reports that the decreased rate of hospital admissions and lengths of stay have realized significant cost savings for the statewide Delaware Title III program.

Title III Grantees, FY 1998

Grantee Name	Location	Service Area	Type of Organization
Christiana Care Health Services	Wilmington	Statewide	Hospital/University-based Medical Center

AIDS Education and Training Centers: Delaware

The AETCs are a network of 15 regional education centers (75 local performance sites covering all 50 states, Washington, D.C., Puerto Rico, and the Virgin Islands) funded by the CARE Act to train clinical health care providers, provide consultation and technical assistance and disseminate rapidly changing information for the effective management of HIV infection. Targeted providers are CARE Act-funded programs, federally funded community migrant health centers, and clinicians serving persons living with HIV infection. From FY 1991 to FY 1998, \$171 million was appropriated for AETC programs in the U.S.

- ▶ Mid-Atlantic AETC
- ▶ States Served: Delaware, District of Columbia, Maryland, Virginia, West Virginia
- ▶ Primary Grantee: Virginia Commonwealth University, Richmond, VA
- ▶ Subcontractors in State: Wilmington Hosp./Christiana Care Health Systems - Wilmington

Funding History

Year	1996	1997	1998	Total
Total AETC Funding for State	\$94,542	\$77,000	\$100,000	\$271,542

Training Highlights from FY 1997

- Mid-Atlantic AETC performance sites conducted courses on a variety of training topics. These include:
 - “HIV Prevention Counseling: The Facts,” conducted by the performance site located at Inova in Fairfax, Virginia, provided seven hours of training on prevention of perinatal transmission, adolescents and HIV, antiretroviral therapy, early intervention and management, epidemiology, ethical/legal issues, infection control, psychosocial issues, risk assessment and sexual history taking, and substance abuse.
 - The West Virginia performance site provided a training titled “New Modalities in HIV Therapy.” Topics covered included: clinical manifestations of HIV disease; combination therapy; early intervention and management; epidemiology; ethical/legal issues; immunology/virology; viral load testing; and workplace issues. Collaborating organizations included the local hospital nursing development department.
 - A course titled, “AIDS Awareness in Howard University” was conducted by the Washington, D.C. performance site. Topics covered during the course included: adolescents and HIV; early intervention and management; epidemiology; prevention and behavior change; racial and ethnic minority issues; HIV and women; and testing and counseling.

- The STD/HIV Conference, held in November 1997 by the Delaware performance site, provided information on a wide range of HIV-related topics.
- The Maryland performance site's "AIDS Service Medical Provider Seminar" provided information on barriers to education; cultural competency; clinical manifestations; antiretroviral therapies and viral load testing; and tuberculosis.